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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

06/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Euri First name  M. Middle name	First name  Middle name
	Bring your picture identification to your meeting with the trustee.	Chesebro Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3104	

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Debtor 1 Lori M. Chesebro Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EIN	EIN
5.	Where you live	38 2nd Ave.	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Herkimer County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 22-60529-6-dd Doc 1 Filed 08/17/22 Entered 08/17/22 11:49:51 Desc Main Page 3 of 51 Document Case number (if known) Debtor 1 Lori M. Chesebro Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with

you, or by a business partner, or by an affiliate?

Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

☐ No.

Go to line 12.

Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Document Page 4 of 51 Case number (if known) Debtor 1 Lori M. Chesebro Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. Go to Part 4. of any full- or part-time business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S. C. § I am not filing under Chapter 11. No. 1182(1)? For a definition of small I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. business debtor, see 11 U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own

Number, Street, City, State & Zip Code

Where is the property?

perishable goods, or livestock that must be fed.

or a building that needs urgent repairs?

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Debtor 1 Lori M. Chesebro Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Lori M. Chesebro				Case numbe	(if known)
Part	t 6: Answer These Quest	ions for Re	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a pe			ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily money for a business or in			
			☐ No. Go to line 16c.	<b>3</b>	,	
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consu	mer debts or busines	s debts
17.	Are you filing under	□ No.	I am not filing under Chapt	er 7. Go to line 18.		
	Chapter 7?					
	Do you estimate that after any exempt property is excluded and	Yes.	are paid that funds will be a			erty is excluded and administrative expenses
	administrative expenses are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000	)	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		☐ 5001-10,00		☐ 50,001-100,000
	owe?	☐ 100-1	99	□ 10,001-25,0	000	☐ More than100,000
		□ 200-9	99			
19.	How much do you	<b>■</b> \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	<b>1</b> \$10,000,00	1 - \$50 million	☐ \$1,000,000,001 - \$10 billion
	be worth:	□ \$100,0	001 - \$500,000		1 - \$100 million	☐ \$10,000,000,001 - \$50 billion
		☐ \$500,0	001 - \$1 million	□ \$100,000,00	01 - \$500 million	☐ More than \$50 billion
20.	How much do you	<b>■</b> \$0 - \$	50.000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	<b>□</b> \$10,000,00		□ \$1,000,000,001 - \$10 billion
	to be:		001 - \$500,000	_	1 - \$100 million	\$10,000,000,001 - \$50 billion
		□ \$500,0	001 - \$1 million	□ \$100,000,00	01 - \$500 million	☐ More than \$50 billion
Part	7: Sign Below					
For	you	I have ex	amined this petition, and I d	eclare under penalty of	perjury that the inforn	nation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.
			rney represents me and I did t, I have obtained and read			t an attorney to help me fill out this
		I request	relief in accordance with the	e chapter of title 11, Unit	ed States Code, spec	cified in this petition.
		bankrupto and 3571	cy case can result in fines up			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
			Chesebro		Signature of Debtor	72
		Signature	of Debtor 1			
		Executed			Executed on	
			MM / DD / YYYY		MM	/ DD / YYYY

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Debtor 1 Lori M. Chesebro Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jessica	a G. Grady, Esq.	Date	August 9, 2022	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Jessica G	. Grady, Esq. 512322			
Grady BK	, PLLC			
Firm name				
225 Green	field Parkway			
Ste. 107				
Liverpool,	NY 13088			
Number, Street,	City, State & ZIP Code			
Contact phone	315-299-9005	Email address	jessica@gradybk.com	
512322 NY	•			
Bar number & S	tate			

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			Document	Page 8 of 51		
Fill in	n this informa	tion to identify your	case:			
Debto	or 1	Lori M. Chesebro				
		First Name	Middle Name	Last Name		
Debto	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	d States Bank	ruptcy Court for the:	NORTHERN DISTRICT OF	NEW YORK		
	number					
(if know	vn)				_	ck if this is an
					ame	nded filing
<u>Offi</u>	cial Forn	<u>n 106Sum</u>				
Sun	nmary of	Your Assets a	and Liabilities and	Certain Statistical Information		12/15
				filing together, both are equally responsible		
				formation on this form. If you are filing amend box at the top of this page.	led sched	lules after you file
				, acr at the top of the page.		
Part 1	Summar	ize Your Assets				
						assets
					Value	of what you own
1.	Schedule A/E	B: Property (Official Fo	orm 106A/B)		\$	0.00
	1a. Copy line	55, Total real estate, fr	om Schedule A/B		Ψ	
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B		\$	21,526.00
	1c. Copy line (	63, Total of all property	on Schedule A/B		\$	21,526.00
					· <del></del>	,
Part 2	2: Summar	ize Your Liabilities				
					Your	liabilities
					Amou	int you owe
			aims Secured by Property (Off		¢	3,293.00
2	2a. Copy the t	otal you listed in Colur	nn A, <i>Amount of claim,</i> at the b	pottom of the last page of Part 1 of Schedule D	\$	3,293.00
3.	Schedule E/F.	Creditors Who Have	Unsecured Claims (Official For	m 106E/F)	\$	0.00
;	3a. Copy the	total claims from Part	(priority unsecured claims) fr	om line 6e of Schedule E/F	Ψ	0.00
;	3b. Copy the	total claims from Part 2	2 (nonpriority unsecured claims	s) from line 6j of Schedule E/F	\$	17,640.00
				Your total liabilities	\$ \$	20,933.00
Part 3	3: Summar	ize Your Income and	Expenses			
		our Income (Official Fo			\$	2,218.11
		our Expenses (Official on the complex of the comple			\$	2,194.00
Part 4	1: Answer	Those Questions for	Administrative and Statistic	al Pacards		
ı arı-	Allswei	These Questions for	Administrative and Statistics	ai Necorus		
			er Chapters 7, 11, or 13?	obtaban and anko Militaria a di ancienti		ala a de la
	☐ No. You	nave nothing to report	on this part of the form. Check	this box and submit this form to the court with ye	our other s	cnedules.
	Yes					
7.	What kind of	debt do you have?				

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Lori M. Chesebro Case number (if known)

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 649.48

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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			Docur	nent Page 10 of 51		
Fill in	this info	ormation to identify	your case and this filing:			
Debto	or 1	Lori M. Ches	ehro			
Dobic	, ,	First Name	Middle Name	Last Name		
Debto	or 2					
(Spouse	e, if filing)	First Name	Middle Name	Last Name		
United	d States E	Bankruptcy Court for	the: NORTHERN DISTRIC	T OF NEW YORK		
						_
Case	number	-				☐ Check if this is an
						amended filing
Offi	cial F	orm 106A/E	}			
Scl	hedu	ıle A/B: Pı	onerty			12/15
				ly once. If an asset fits in more than o	ana aatamami liat tha aaaat ir	
think it	fits best.	Be as complete and a ore space is needed,	accurate as possible. If two ma	rried people are filing together, both a form. On the top of any additional pag	are equally responsible for s	upplying correct
Part 1	Describ	pe Each Residence, B	uilding, Land, or Other Real Es	tate You Own or Have an Interest In		
1. <b>Do</b> v	you own o	r have any legal or eq	uitable interest in any residence	ce, building, land, or similar property?		
_		, ,	•			
■ N	No. Go to P	Part 2.				
□ Y	es. Where	e is the property?				
Part 2	Describ	oe Your Vehicles				
				vehicles, whether they are registed		ehicles you own that
someo	one else d	frives. If you lease a	vehicle, also report it on Sch	edule G: Executory Contracts and L	Inexpired Leases.	
3. <b>Ca</b> ı	rs, vans,	trucks, tractors, sp	ort utility vehicles, motorcy	/cles		
_						
	No					
<b>—</b> \	res .					
					B	
3.1	Make:	Chevy	Who has an ii	nterest in the property? Check one		laims or exemptions. Put ed claims on Schedule D:
	Model:	Sonic	■ Debtor 1 or	ıly		ims Secured by Property.
	Year:	2016	Debtor 2 or	ıly	Current value of the	Current value of the
	Approxim	nate mileage:	Debtor 1 ai	nd Debtor 2 only	entire property?	portion you own?
	Other info	ormation:	At least on	e of the debtors and another		
			☐ Check if the (see instruct	nis is community property ions)	\$13,500.00	\$13,500.00
4. <b>Wa</b>	tercraft.	aircraft. motor hom	es. ATVs and other recrea	tional vehicles, other vehicles, an	d accessories	
		•	•	vessels, snowmobiles, motorcycle a		
<b>I</b>						
	res .					
				r entries from Part 2, including an		\$13,500.00
.pa	ges you	nave attached for F	an 2. write that number he	ere	=>	
D	D	Vana Barranda I	Have als like v			
Part 3		be Your Personal and		the fellowing items		Current value of the
ро ус	ou own o	r nave any legal or	equitable interest in any of	tne following items?		Current value of the portion you own?

claims or exemptions.

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Lori M. Chesebro Case number (if known)

6.	Household goods and furnishings  Examples: Major appliances, furniture, linens, china, kitchenware  □ No	
	Yes. Describe	
	household goods	\$5,000.00
7.	<ul> <li>Electronics</li> <li>Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music conjunction including cell phones, cameras, media players, games</li> <li>□ No</li> <li>■ Yes. Describe</li> </ul>	ollections; electronic devices
	electronics	\$1,500.00
8.	Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles  ■ No  □ Yes. Describe	or baseball card collections;
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments  ■ No  □ Yes. Describe	and kayaks; carpentry tools;
10	<ul> <li>Firearms         Examples: Pistols, rifles, shotguns, ammunition, and related equipment</li> <li>■ No</li> <li>□ Yes. Describe</li> </ul>	
11	<ul> <li>Clothes         <ul> <li>Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories</li> <li>□ No</li> <li>■ Yes. Describe</li> </ul> </li> </ul>	
	clothes	\$100.00
12	. <b>Jewelry</b> Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g	old, silver \$50.00
13	. Non-farm animals  Examples: Dogs, cats, birds, horses  ■ No  □ Yes. Describe	
14	. Any other personal and household items you did not already list, including any health aids you did not list	
	■ No	
	☐ Yes. Give specific information	
15	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$6,650.00

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DE	EDIOI I LOTI WI. Ches	sebro	Case number (if known)	
Pa	rt 4: Describe Your Finance	cial Assets		
		egal or equitable interest in	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	have in your wallet, in your h	ome, in a safe deposit box, and on hand when you file your petition	
			Cash	\$25.00
			counts; certificates of deposit; shares in credit unions, brokerage house with the same institution, list each.	ses, and other similar
	■ Yes		Institution name:	
		17.1.	Americu - checking & savings	\$25.00
		17.2.	GPO FCU - checking & savings	\$30.00
		17.3.	cashapp	\$0.00
		17.4.	Venmo	\$0.00
	Examples: Bond funds, ■ No		rokerage firms, money market accounts	
	Yes	Institution or issue	porated and unincorporated businesses, including an interest in	an IIC partnership and
19.	joint venture	ock and interests in incorp	orated and unincorporated businesses, including an interest in	an ELO, partilership, and
	_ 110	ormation about them Name of entity:	% of ownership:	
20.	Negotiable instruments	include personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	■ No □ Yes. Give specific info	ormation about them Issuer name:		
	Retirement or pension Examples: Interests in I  No		403(b), thrift savings accounts, or other pension or profit-sharing plan	ns
	☐ Yes. List each accoun	nt separately.  Type of account:	Institution name:	
22.		d deposits you have made s	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies	, or others
	☐ Yes		Institution name or individual:	

Case 22-60529-6-dd Doc 1 Filed 08/17/22 Entered 08/17/22 11:49:51 Page 13 of 51 Document Case number (if known) Debtor 1 Lori M. Chesebro 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2021 federal tax refund \$1,296.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

☐ Yes. Give specific information..

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Det	tor 1 Lori M. Chesebro		Case number (if known)	
_	Claims against third parties, whether or not you have filed a law Examples: Accidents, employment disputes, insurance claims, or right No		and for payment	
_	☐ Yes. Describe each claim			
_	Other contingent and unliquidated claims of every nature, inclu  ■ No	ding counterclaims	of the debtor and rights to s	et off claims
	☐ Yes. Describe each claim			
35.	Any financial assets you did not already list			
	■ No □ Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$1,376.00
Par	t 5: Describe Any Business-Related Property You Own or Have an Inter-	est In. List any real esta	ate in Part 1.	
37. <b>I</b>	Do you own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm-			
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Par	t7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	• • •			
53.	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	?		
ı	No			
	☐ Yes. Give specific information			
54	Add the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
04.	And the delial value of all of your chines from that it. White the			φυ.υυ_
Par	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.		\$13,500.00		Ψ0.00
57.		\$6,650.00		
58.		\$1,376.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	3	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$21,526.00	Copy personal property tota	\$21,526.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$21,526.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this information to identify your case:					
Debtor 1	Lori M. Chesebro				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF NEW YORK		
Case number  (if known)  Check if this is an amended filing					

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	2016 Chevy Sonic Line from Schedule A/B: 3.1	\$13,500.00		\$4,450.00	11 U.S.C. § 522(d)(2)		
	Line Irom Scriedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit			
	2016 Chevy Sonic Line from Schedule A/B: 3.1	\$13,500.00		\$5,757.00	11 U.S.C. § 522(d)(5)		
	Line Holli Schedule Arb. 3.1			100% of fair market value, up to any applicable statutory limit			
	household goods Line from Schedule A/B: 6.1	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)		
	Line Holli Schedule Arb. 0.1			100% of fair market value, up to any applicable statutory limit			
	electronics Line from Schedule A/B: 7.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)		
	Line Holli Schedule Arb. 1.1			100% of fair market value, up to any applicable statutory limit			
	clothes Line from Schedule A/B: 11.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)		
	Line Ironi Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit			

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De	btor 1 Lori M. Chesebro			Case number (if known)	
Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	misc. jewelry Line from Schedule A/B: 12.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(4)
	Zino nom osnosalo 772. TZI			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$25.00		\$25.00	11 U.S.C. § 522(d)(5)
	Line from Scriedule Arb. 10.1			100% of fair market value, up to any applicable statutory limit	
	Americu - checking & savings Line from Schedule A/B: 17.1	\$25.00		\$25.00	11 U.S.C. § 522(d)(5)
LI	Line IIIIII Scriedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
	GPO FCU - checking & savings Line from Schedule A/B: 17.2	\$30.00		\$30.00	11 U.S.C. § 522(d)(5)
	Line Holli Schedule Arb. 17.2			100% of fair market value, up to any applicable statutory limit	
	2021 federal tax refund Line from Schedule A/B: 28.1	\$1,296.00		\$1,296.00	11 U.S.C. § 522(d)(5)
	Line Holli Schedule PVB. 20.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every  ■ No  □ Yes. Did you acquire the property cover	3 years after that for ca	ases fi	,	,
	□ No	red by the exemption w	umm i	,213 days before you filed this case	•
	П Voo				

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	_ 000_0 0 0.0	Document	Page 17	7 of 51		2
Fill in this informat	ion to identify you	r case:				
Debtor 1	Lori M. Chesebr	0				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankr	ruptcy Court for the:	NORTHERN DISTRICT OF NE	EW YORK			
Case number (if known)					☐ Check	if this is an
					amend	ded filing
Official Form	106D					
	<del></del>	Who Have Claims	Secure	d by Propert	y	12/15
		f two married people are filing togeth out, number the entries, and attach it				
1. Do any creditors ha	ve claims secured by	your property?				
☐ No. Check th	is box and submit th	nis form to the court with your other	r schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in all	l of the information l	pelow.				
	ecured Claims					
		nore than one secured claim, list the cre	editor senaratel	Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditor cal order according to the creditor's name	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 AmeriCU		Describe the property that secures	the claim:	\$3,293.00	\$13,500.00	\$0.00
Creditor's Name		2016 Chevy Sonic				
Attac Decilor						
Attn: Bankrı 1916 Black F		As of the date you file, the claim is:	Check all that			
Rome, NY 13		apply.  Contingent				
Number, Street, Cit	y, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or se	cured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the o	debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim community debt	relates to a	Other (including a right to offset)	Purchase	Money Security		
	Opened					
	11/16 Last					
Date debt was incurre	Active 7/08/22	Last 4 digits of account num	ober 0001			

Add the dollar value of your entries in Column A on this page. Write that number here: \$3,293.00 If this is the last page of your form, add the dollar value totals from all pages. \$3,293.00 Write that number here:

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	t Page 18 of 51		
Fill in this	s information to identify your o	case:			
Debtor 1	Lori M. Chesebro				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT O	F NEW YORK		
Case num (if known)	ber			_	heck if this is an
				a	mended filing
	Form 106E/F ule E/F: Creditors W	ho Have Unsecur	ed Claims		12/15
Schedule G Schedule D left. Attach	: Executory Contracts and Unexp : Creditors Who Have Claims Sect	ired Leases (Official Form 106 ured by Property. If more spac e. If you have no information t	Also list executory contracts on Sch G). Do not include any creditors with the is needed, copy the Part you need to report in a Part, do not file that Pa	th partially secured claims d, fill it out, number the en	that are listed in tries in the boxes on the
	creditors have priority unsecured				
`	Go to Part 2.	a ciamis agamst you:			
_					
☐ Yes	S.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any	creditors have nonpriority unsec	ured claims against you?			
□ No.	You have nothing to report in this pa	art. Submit this form to the court	with your other schedules.		
■ Yes			,		
unsecu	ired claim, list the creditor separately	for each claim. For each claim	of the creditor who holds each clain listed, identify what type of claim it is. I you have more than three nonpriority	Do not list claims already inc	luded in Part 1. If more
					Total claim
4.1 <b>A</b>	ffirm	Last 4 digits of	f account number		\$200.00
6:	onpriority Creditor's Name 50 California St. an Francisco, CA 94108	When was the	debt incurred?	_	
N	umber Street City State Zip Code ho incurred the debt? Check one.	As of the date	you file, the claim is: Check all that a	apply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated	1		
	Debtor 1 and Debtor 2 only	☐ Disputed	-		
	At least one of the debtors and and	_ '	RIORITY unsecured claim:		
	Check if this claim is for a comm				
de	the claim subject to offset?	•	arising out of a separation agreement y claims	or divorce that you did not	
	No	☐ Debts to per	nsion or profit-sharing plans, and other	r similar debts	
	] Yes	Other. Spec	ify		

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Debt	Lori M. Cnesebro		Case number (if known)			
4.2	AFS/AmeriFinancial Solutions, LLC.	Last 4 digits of account number	7632	\$37.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 65018 Baltimore, MD 21264	When was the debt incurred?	Opened 8/23/19 Last Active 04/19			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta			
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Medical De	bt Medical			
4.3	Bayviewcdata	Last 4 digits of account number	1680	\$211.00		
	Nonpriority Creditor's Name Po Box 385	When was the debt incurred?	Opened 10/01/19			
	Fair Haven, NY 13064  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sons	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes	Other. Specify Medical				
4.4	CAPITAL ONE	Last 4 digits of account number	2784	\$728.00		
	Nonpriority Creditor's Name BANKRUPTCY DEPARTMENT PO BOX 30285 SALT LAKE CITY, UT 84130	When was the debt incurred?	Opened 03/22 Last Active 10/19			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes	Other Specify				

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Lori M. Cnesebro		Case number (if kno	wn)	
CAPITAL ONE	Last 4 digits of account number	3813		\$462.00
Nonpriority Creditor's Name BANKRUPTCY DEPARTMENT PO BOX 30285 SALT LAKE CITY, UT 84130	When was the debt incurred?	Opened 04/21 10/19	Last Active	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	у	
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or d	livorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other sim	nilar debts	
Yes	Other. Specify			
Comenity Bank	Last 4 digits of account number	5953		\$1,282.00
Nonpriority Creditor's Name Bankruptcy Department PO Box 182125	When was the debt incurred?	Opened 04/20 10/19	Last Active	
Columbus, OH 43218  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that appl	y	
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or d	livorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other sim	nilar debts	
Yes	Other. Specify			
Comenity Bank	Last 4 digits of account number	6092		\$574.00
PO Box 183003	When was the debt incurred?	Opened 05/18 10/17	Last Active	
Columbus, OH 43218  Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply		
Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that appl	y	
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or d	livorce that you did not	
No	Debts to pension or profit-sharing	in nlans, and other sim	nilar debts	
■ No		ig pians, and other SIII	mai debio	
1 1 1 1 1 2 2 2	Other Cresify			

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Debtor 1 Lori M. Chesebro Case number (if known) 4.8 \$1,622.00 **CREDIT ONE BANK** Last 4 digits of account number 5963 Nonpriority Creditor's Name Opened 04/20 Last Active PO Box 98878 When was the debt incurred? 09/19 Las Vegas, NV 89193 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.9 **CREDIT ONE BANK** 8304 Last 4 digits of account number \$1,027.00 Nonpriority Creditor's Name Opened 04/20 Last Active PO Box 98878 When was the debt incurred? 09/19 Las Vegas, NV 89193 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Kohls/Capital One 4090 \$1,059.00 Last 4 digits of account number Nonpriority Creditor's Name **Attn: Credit Administrator** Opened 12/14 Last Active Po Box 3043 When was the debt incurred? 10/19 Milwaukee, WI 53201 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Lori M. Chesebro Case number (if known) 4.1 Macys/fdsb 8940 \$987.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/14 Last Active 9111 Duke Boulevard When was the debt incurred? 09/19 Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 Mission Lane LLC 7337 \$1,136.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 01/21 Last Active Attn: Bankruptcy P.O. Box 105286 When was the debt incurred? 7/14/22 Atlanta, GA 30348 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes North Area Volunteer Ambulance 4.1 Unknown 3 Corp, Inc Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **PO Box 535** Baldwinsville, NY 13027 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Debtor 1 Lori M. Chesebro Case number (if known) 4.1 \$500.00 St. Luke's Memorial Hospital Center Last 4 digits of account number Nonpriority Creditor's Name PO Box 479 When was the debt incurred? Utica, NY 13502 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Synchrony Bank 4631 \$1,700.00 Last 4 digits of account number Nonpriority Creditor's Name ATTN: Bankruptcy Dept Opened 04/20 Last Active PO Box 965061 When was the debt incurred? 09/19 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 SYNCHRONY BANK 7626 \$413.00 Last 4 digits of account number 6 Nonpriority Creditor's Name ATTN: BANKRUPTCY DEPT. Opened 12/20 Last Active PO Box 965061 When was the debt incurred? 08/19 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Debtor	Lori M. Chesebro		Case number (if known)	
4.1	Synchrony Bank	Last 4 digits of account number	3024	\$413.00
	Nonpriority Creditor's Name ATTN: Bankruptcy Dept PO Box 965061	When was the debt incurred?	Opened 01/21 Last Active 09/19	·
	Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	a ciaiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	_		
4.1	TARGET	Last 4 digits of account number	8258	\$449.00
	Nonpriority Creditor's Name C/O FINANCIAL & RETAIL SERVICES MAILSTOP BT PO BOX 9475	When was the debt incurred?	Opened 12/14 Last Active 6/27/22	
	MINNEAPOLIS, MN 55459  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	7.0 0 uuto yeu, o.u	or onook all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card		
4.1 9	Webbank/Fingerhut Nonpriority Creditor's Name	Last 4 digits of account number	3691	\$4,430.00
	6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred?	Opened 03/20 Last Active 08/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No		אַ אָ אָ אָר אָר אָר אָר אָר אָר אָר אָר א	
	☐ Yes	Other. Specify		

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Case number (if known)

4.2 0	Wisconsin Cheeseman	Last 4 digits of account number	839A	\$210.00
Nonpriority Creditor's Name Attn: Bankruptcy 1112 7th Ave	When was the debt incurred?	Opened 12/16 Last Active 8/21/17		
Madison, WI 53782  Number Street City State Zip Code		As of the date you file, the claim	is: Check all that apply	-
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Charge Ac	count	-
4.2	Zip Quadpay	Last 4 digits of account number		\$200.00
	Nonpriority Creditor's Name 228 Park Ave. S PMB 59872	When was the debt incurred?		-
	New York, NY 10003  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify		-
Part 3	List Others to Be Notified About a D	ebt That You Already Listed		
is tr	this page only if you have others to be notified ying to collect from you for a debt you owe to e more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in nat you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1 or 2, then list the collection agenc itional creditors here. If you do not have ad	y here. Similarly, if you
	and Address ter & Garbus, LLP	On which entry in Part 1 or Part 2 did you Line <b>4.19</b> of ( <i>Check one</i> ):		
	otor Parkway	′	Part 1: Creditors with Priority Unsecured Clai	
	mack, NY 11725-5710		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
LVN	and Address V Funding	On which entry in Part 1 or Part 2 did you Line 4.19 of (Check one):	alist the original creditor?  Part 1: Creditors with Priority Unsecured Clai	ims
	S. Cimarron Rd. 424-J		Part 2: Creditors with Nonpriority Unsecured	Claims
	Vegas, NV 89113	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?	
	V Funding LLC		Part 1: Creditors with Priority Unsecured Cla	ims
	Box 1269		Part 2: Creditors with Nonpriority Unsecured	Claims
Gree	enville, SC 29602	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?	

Debtor 1 Lori M. Chesebro

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Debtor 1 Lori M. Chesebro		Case number (if known)		
LVNV FUNDING/RESURGENT CAPITAL ATTN: BANKRUPTCY PO BOX 10587 GREENVILLE, SC 29063	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address Midland Funding 350 Camino De La Reine Ste 100 San Diego, CA 92108	On which entry in Part 1 or Part 2 Line 4.15 of (Check one):  Last 4 digits of account number	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Name and Address Newman & Lickstein 109 South Warren St., Ste. 404 Syracuse, NY 13202-1121	On which entry in Part 1 or Part 2 Line 4.13 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		
Name and Address Portfolio Recovery Associates, LLC 120 Corporate Boulevard Norfolk, VA 23502	On which entry in Part 1 or Part 2 Line <b>4.4</b> of ( <i>Check one</i> ):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		
Name and Address RESURGENT CAPITAL SERVICES PO BOX 10497 GREENVILLE, SC 29603	On which entry in Part 1 or Part 2 Line 4.19 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		
Name and Address Selip & Stylianou PO Box 9004 199 Crossways Park Dr. Woodbury, NY 11797	On which entry in Part 1 or Part 2 Line 4.18 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	17,640.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	17,640.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Lori M. Chesebro	)		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the , Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

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Fill in this	information to identify your	case:	nt rage 20 t	31 01	
Debtor 1	Lori M. Chesebro				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK		
Case num	her				
(if known)					☐ Check if this is an amended filing
O((; - ; -	I = 400I I				<b>3</b>
	I Form 106H	alata wa			
Sched	lule H: Your Cod	eptors			12/15
our name	nd number the entries in the earlies and case number (if known) you have any codebtors? (If y	. Answer every question	l.		of any Additional Pages, write
■ No					
☐ Yes	<b>S</b>				
	hin the last 8 years, have you				states and territories include
_		Trovada, Trovado, Tro		g.c, a.i.a rriccoi.i,	
	Go to line 3.				
⊔ Yes	s. Did your spouse, former spou	ise, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only i	f that person is a guaran	itor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	 ne
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
2 2				Ochadula D. P	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, lin	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	

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Fill	in this information to identify your	case:							
Del	otor 1 Lori M. Che	esebro			_				
	otor 2				_				
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF NEW YORK						
	se number nown)					☐ A sup	nended filin	nowing po	ostpetition chapter ving date:
0	fficial Form 106I					MM /	DD/ YYYY	-	
S	chedule I: Your Inc	ome							12/1
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you have a separate sheet to this form.  Describe Employment	u are married and not fili ur spouse is not filing w . On the top of any additi	ng jointly, and your s ith you, do not includ	pouse le infor	is liv matic	ing with you on about you	, include in Ir spouse.	nformation of the state of the	on about your space is needed,
1.	Fill in your employment information.		Debtor 1			Del	otor 2 or n	on-filing	spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				Employed Not employ	yed	
	employers.	Occupation	File Clerk						
	Include part-time, seasonal, or self-employed work.	Employer's name	Rheinhardt & Br	ay					
	Occupation may include student or homemaker, if it applies.	Employer's address	85 Otsego St. Ilion, NY 13357						
		How long employed t	here? 2 month	ıs					
Par	Give Details About Mo	onthly Income							
	mate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothing to re	port for	any	line, write \$0 i	n the spac	e. Include	e your non-filing
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	for all e	emplo	oyers for that	person on	the lines	below. If you need
						For Debtor		or Debtor on-filing s	
2.	List monthly gross wages, sald deductions). If not paid monthly,			2.	\$	2,543	s.15 \$_		N/A
3.	Estimate and list monthly over	time pay.		3.	+\$	0	.00 +\$		N/A

Official Form 106I Schedule I: Your Income page 1

2,543.15

N/A

Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Lori M. Chesebro	-	C	ase	number (if known) _				
						Debtor 1			pouse	
	Cop	by line 4 here	4.		\$_	2,543.15	\$		N/A	<u>-</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$	463.62	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	).	\$_	0.00	\$		N/A	<u> </u>
	5c.	Voluntary contributions for retirement plans	50		\$_	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$_	0.00	\$		N/A	_
	5e.	Insurance	5e		\$_	0.00	\$		N/A	_
	5f.	Domestic support obligations Union dues	5f.		\$ \$	0.00	\$		N/A N/A	_
	5g. 5h.	Other deductions. Specify:	5g 5h		<sub>\$</sub> -	0.00 +	· :		N/A N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		°— \$		\$		N/A	_
7.			7.		Ψ \$	463.62	\$			_
		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		Φ —	2,079.53	Φ		N/A	
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	9.0		\$	0.00	¢		N/A	
	8b.	Interest and dividends	8a 8b		° \$	0.00	\$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		<i>)</i> .	Ψ_	0.00	Ψ		N/A	<u> </u>
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	<b>)</b> .	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	80	ı.	\$	0.00	\$		N/A	_
	8e.	Social Security	86	€.	\$_	0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	0.00	\$		N/A	_
	8g.	Pension or retirement income	89		\$_	0.00	\$		N/A	_
	8h.	Other monthly income. Specify: Tax refund	_ 8h	1.+	\$_	138.58 +	\$		N/A	<u> </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	i	138.58	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,218.11 + \$		N/A	= \$	2,218.11
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		<b>2,210.11</b>		IVA	_	2,210.11
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not excify:	depe					hedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certaillies						12.	\$	2,218.11
13.	Do	you expect an increase or decrease within the year after you file this form	?					ı	Combi month	ned ly income
		No.								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:							
Deb	tor 1	Lori M. Ches	sebro			Check if this is:				
D-1-	40					_	An amended filing			
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter the following date:		
	,					_	<u>'</u>			
Unit	ed States Bankı	ruptcy Court for the	: NORTE	IERN DISTRICT OF NEW	YORK		MM / DD / YYYY			
	e number									
(If ki	nown)									
Of	fficial Fo	rm 106J								
		J: Your	Evner	1808				12/1!		
Be a	as complete ormation. If m mber (if know	and accurate as	s possible eded, atta ry questio	If two married people ar ch another sheet to this				or supplying correct		
1.	Is this a join		enoia							
	■ No. Go to	o line 2.	in a separ	ate household?						
	□N	lo	-	al Form 106J-2, <i>Expenses</i>	for Separate Househ	nold of Debt	tor 2.			
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 1		Dependent's age	Does dependent live with you?		
	Do not state	the						□ No		
	dependents	names.						☐ Yes		
								□ No		
								☐ Yes		
								□ No		
								☐ Yes		
								□ No □ Yes		
3.	Do vour ext	penses include	_	No				□ res		
	expenses o	f people other t d your depende	han $_{m \Box}$	Yes						
Est exp app	imate your ex enses as of a plicable date.	a date after the l	our bankri bankruptc	uptcy filing date unless y y is filed. If this is a supp	lemental <i>Schedule</i> .					
the		h assistance an		government assistance it cluded it on <i>Schedule I:</i> Y			Your exp	enses		
4.		or home owners		ses for your residence. In r lot.	nclude first mortgage	4. \$		750.00		
	If not includ	ded in line 4:								
	4a. Real	estate taxes				4a. \$		0.00		
	4b. Prope	erty, homeowner's	s, or renter	's insurance		4b. \$		0.00		
		•	•	ipkeep expenses		4c. \$		0.00		
_		eowner's associat				4d. \$		0.00		
5.	Additional i	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00		

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Debtor 1 Lo	ori M. Chesebro	Case num	ber (if known)	
6. Utilities:				
	ectricity, heat, natural gas	6a.	\$	0.00
	ater, sewer, garbage collection	6b.	\$	0.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	50.00
	her. Specify:	6d.	\$	0.00
	d housekeeping supplies	7.	·	450.00
	e and children's education costs	8.	\$	0.00
-	, laundry, and dry cleaning	9.	\$	50.00
_	l care products and services	10.	\$	75.00
	and dental expenses	11.		
	rtation. Include gas, maintenance, bus or train fare.	11.	Ψ	125.00
	iclude car payments.	12.	\$	217.00
	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	ele contributions and religious donations	14.	·	0.00
. Insuranc	•			0.00
	iclude insurance deducted from your pay or included in lines 4 or 20.			
	e insurance	15a.	\$	0.00
15b. He	ealth insurance	15b.	\$	0.00
15c. Ve	phicle insurance	15c.	\$	65.00
	her insurance. Specify:	15d.	·	0.00
	On not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
Specify:		16.	\$	0.00
	ent or lease payments:	47-	Φ.	007.00
	ar payments for Vehicle 1	17a.	·	237.00
	ar payments for Vehicle 2	17b.	·	0.00
	her. Specify:	17c.	·	0.00
	her. Specify:	17d.	\$	0.00
	yments of alimony, maintenance, and support that you did not report		\$	0.00
	d from your pay on line 5, Schedule I, Your Income (Official Form 106 ayments you make to support others who do not live with you.	oi).	\$	0.00
Specify:	yments you make to support others who do not live with you.	19.	Ψ	0.00
, ,	al property expenses not included in lines 4 or 5 of this form or on S		our Income	
	ortgages on other property	20a.		0.00
	eal estate taxes	20b.		0.00
	operty, homeowner's, or renter's insurance	20c.	·	0.00
	aintenance, repair, and upkeep expenses	20d.	·	0.00
	omeowner's association or condominium dues	20a. 20e.		
			·	0.00
. Other: S	pecify: car maintenance	21.	+\$	75.00
	e your monthly expenses			
	l lines 4 through 21.	_	\$	2,194.00
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	
22c. Add	line 22a and 22b. The result is your monthly expenses.		\$	2,194.00
	e your monthly net income.			
23a. Co	ppy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,218.11
23b. Co	ppy your monthly expenses from line 22c above.	23b.	-\$	2,194.00
				,
	ubtract your monthly expenses from your monthly income.			04.44
Th	e result is your monthly net income.	23c.	\$	24.11
For examp modification	expect an increase or decrease in your expenses within the year after ole, do you expect to finish paying for your car loan within the year or do you expect on to the terms of your mortgage?			e or decrease because c
■ No.				
ΠVoc	Explain here:			

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Fill in this inform	mation to identify your	00001			
Debtor 1	Lori M. Chesebro	Middle Name	Last Name		
Debtor 2	. not riame	mado rame	Zaot Hamb		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK		
Case number _ (if known)					☐ Check if this is an amended filing
Official Form		an Individual	Debtor's S	Schedules	12/15
obtaining money years, or both. 18		n connection with a banl			ement, concealing property, or 00, or imprisonment for up to 20
Did you pa	y or agree to pay some	eone who is NOT an attor	ney to help you fill o	out bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				akruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
•	Ity of perjury, I declare e true and correct.	that I have read the sum	mary and schedules	filed with this declaration	on and
X /s/ Lori	M. Chesebro		X		
Lori M.	Chesebro re of Debtor 1		Signature	e of Debtor 2	
Date /	August 9, 2022		Date		

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Fill in	this inforn	nation to identify you	r case:			
Debto		Lori M. Chesebr				
		First Name	Middle Name	Last Name		
Debto (Spouse	r 2 if, filing)	First Name	Middle Name	Last Name		
United	l States Bai	nkruptcy Court for the:	NORTHERN DISTRICT (	OF NEW YORK		
_		mapley Court for the				
(if know	number _ n)					Check if this is an amended filing
		rm 107 of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/2:
nform numbe	ation. If mer (if knowr	ore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
Part 1	•		arital Status and Where You	Lived Before		
i. vv	nat is youi	current marital statu	IS?			
	Married Not mar	ried				
2. D	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	l No l Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	ı.	
D	ebtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
	l No l Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fi	ll in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,071.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Lori M. Chesebro Case number (if known)

Debtor 1 Lori M. Chesebro		Case	e number (if known)	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2021)	■ Wages, commissions, bonuses, tips	\$4,025.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2020)	■ Wages, commissions, bonuses, tips	\$3,099.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
and other public benefit payments winnings. If you are filing a joint call List each source and the gross income No  Yes. Fill in the details.	ase and you have income that	you received together, list it o	nly once under Debtor 1.	nd gambling and lottery
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2021)	Unemployment	\$15,278.00		
For the calendar year before that: (January 1 to December 31, 2020 )	Unemployment	\$7,442.00		
Part 3: List Certain Payments You	u Made Before You Filed for	Bankruptcy		
6. Are either Debtor 1's or Debtor 1  No. Neither Debtor 1 nor individual primarily for	2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	er debts? umer debts. Consumer debts old purpose."		01(8) as "incurred by an
☐ No. Go to line	fore you filed for bankruptcy, d 7.	id you pay any creditor a tota	l of \$7,575* or more?	
paid that on the paid that of the paid t	each creditor to whom you pa creditor. Do not include payment e payments to an attorney for t	nts for domestic support oblights bankruptcy case.	ations, such as child support	and alimony. Also, do
	nt on 4/01/25 and every 3 year		or after the date of adjustmen	nt.
	or both have primarily const fore you filed for bankruptcy, d		of \$600 or more?	
☐ No. Go to line	7.			
include pa	each creditor to whom you pa syments for domestic support of or this bankruptcy case.			
Creditor's Name and Address	Dates of payme	ent Total amount	Amount you Was this still owe	payment for

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Case number (if known)

Debtor 1 Lori M. Chesebro

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	ayment for
	AmeriCU	last 3 months	\$711.00	\$3,293.00	☐ Mortgag	e
	Attn: Bankruptcy				■ Car	
	1916 Black River Blvd				☐ Credit C	ard
	Rome, NY 13440				☐ Loan Re	
						s or vendors
					Other	
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ontrol, or owner of 20% o	eral partners; partners of their voting	erships of which yog g securities; and a	ou are a gener ny managing a	al partner; corporations agent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	<ul><li>insider?</li><li>Include payments on debts guaranteed or cos</li><li>No</li><li>Yes. List all payments to an insider</li></ul>	igned by an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case
	LVNV Funding v. Lori Chesebro	consumer	Herkimer Cour	nty Supreme	☐ Pending	)
			Court		☐ On app	eal
					■ Conclud	ded
					\$4,429.57	judgment
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.		erty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	i			property

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Case number (if known) Document

11.	Within 90 days before you filed for bank accounts or refuse to make a payment in the No  Yes. Fill in the details.		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any a	mounts from your
	Creditor Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, court-appointed receiver.		as any of your property in the possession of an a er official?	assignee for the bene	fit of creditors, a
	■ No □ Yes				
Pa	t 5: List Certain Gifts and Contribution	ns			
13.	No	ruptcy, d	lid you give any gifts with a total value of more t	han \$600 per person?	•
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$6	00	Describe the gifts	Dates you gave	Value
	per person		Describe the gins	the gifts	value
	Person to Whom You Gave the Gift and Address:	k			
14.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or		lid you give any gifts or contributions with a tota on.	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and	Descri	be any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred		the amount that insurance has paid. List pending ace claims on line 33 of <i>Schedule A/B: Property.</i>	loss	los
Pa	t 7: List Certain Payments or Transfer	's			
16.	consulted about seeking bankruptcy or	preparir	d you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services required		ty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Grady BK, PLLC 225 Greenfield Parkway Ste. 107 Liverpool, NY 13088 jessica@gradybk.com		Attorney Fees		\$1,100.00

Debtor 1 Lori M. Chesebro

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Case number (if known)

Debtor 1 Lori M. Chesebro

17.	Within 1 year before you filed for bankrupto promised to help you deal with your credit. Do not include any payment or transfer that you	ors or to make payments			r transfer any prope	rty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and variansferred	/alue of any prope	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your landled both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial affa nade as security (such as	airs? the granting of a se	, , ,	• • •	,
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transfer			iny property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		ny property to a se	elf-settled tru	st or similar device	of which you are a
	Name of trust	Description and	alue of the prope	rty transform	ad	Date Transfer was
	Name of trust	Description and	raide of the prope	ity transient	su	made
			. 5 . 10.			
Par	t 8: List of Certain Financial Accounts, In	istruments, Sate Deposi	t Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution in the details.	or other financial accou	nts; certificates o			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	clo: mo	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, any	safe deposit	box or other depos	itory for securities,
	No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the o	contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	home within 1 ye	ear before yo	u filed for bankrupte	cy?
	■ No					
	☐ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		escribe the o	contents	Do you still have it?

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Debtor 1 Lori M. Chesebro Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prop	erty y	you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.				
	Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP	D€	escribe the property	Value
		Code)			
Par	t 10: Give Details About Environmental Informa	ation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances.	ir, land, soil, surface water, grou	_		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	ıl law	, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		us wa	aste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wh	en th	ey occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liab	le un	der or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No				
	Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any en	viron	nmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Par	t 11: Give Details About Your Business or Con	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have a	any o	of the following connections to any	business?
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activit	y, eit	her full-time or part-time	
	☐ A member of a limited liability company	•		·	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execut	tive of a corporation			

 $\hfill\square$  An owner of at least 5% of the voting or equity securities of a corporation

Doc 1 Filed 08/17/22 Entered 08/17/22 11:49:51 Desc Main Case 22-60529-6-dd Document Page 40 of 51 Debtor 1 Lori M. Chesebro Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers connection

	ng a false statement, concealing property, or obtaining money or property by fraud in p to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Lori M. Chesebro Lori M. Chesebro	Signature of Debtor 2
Signature of Debtor 1	Signature of Deptor 2
Date August 9, 2022	Date
Did you attach additional pages to <i>Your State</i> ■ No □ Yes	tement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is	s not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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				•
Fill in this infor	mation to identify your	case:		1
Debtor 1	Lori M. Chesebro			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF NEW YORK	
Officed States Da	ankrupicy Court for the.	NORTHERN DIS	TRICT OF NEW TORK	
Case number _				☐ Check if this is an
				amended filing
Official Fo	rm 100			
				<u>_</u>
Statemer	<u>nt of Intentio</u>	n tor Indiv	<u>/iduals Filing Under Chapt</u>	er 7 12/15
	ividual filing under chap	-	Il out this form if:	
_	e claims secured by you		at avaired	
	sed personal property a is form with the court w		ot expired. you file your bankruptcy petition or by the date s	set for the meeting of creditors.
whiche	ever is earlier, unless th		e time for cause. You must also send copies to t	
on the	torm			
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
Be as complete:	and accurate as possib	le. If more space is	s needed, attach a separate sheet to this form. O	n the top of any additional pages.
	our name and case nun			rano top or any additional pages,
Dort 1. Liet V	our Craditora Who Hous	Secured Claims		
Part 1: List Y	our Creditors Who Have	s Secured Claims		
•	-	rt 1 of Schedule D	: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
information be Identify the cr	elow. editor and the property th	nat is collateral	What do you intend to do with the property the	at Did you claim the property
			secures a debt?	as exempt on Schedule C?
Creditor's A	AmeriCU		☐ Surrender the property.	□No
name:			Retain the property and redeem it.	•
Description of	2046 Chaus Camia		Retain the property and enter into a	■ Yes
	2016 Chevy Sonic		Reaffirmation Agreement.	
property securing debt:			☐ Retain the property and [explain]:	
occurring door.	•			<del></del>
Part 2: List Y	our Unexpired Personal	Property Leases		
			in Schedule G: Executory Contracts and Unexpi	
			nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p	
			<b>.</b>	^ /
Describe your u	inexpired personal prop	erty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	ased			<b>–</b> 140
Property:				☐ Yes
Laggarie				П
Lessor's name: Description of lea	ased			□ No
Property:				☐ Yes

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Debtor 1 Lori M. Chesebro	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
1.7	Li Tes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
	_
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	<b></b>
Property.	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
	_ 163
Part 3: Sign Below	
	about any property of my estate that secures a debt and any personal
property that is subject to an unexpired lease.	
X /s/ Lori M. Chesebro	X
Lori M. Chesebro	Signature of Debtor 2
Signature of Debtor 1	
Date August 9, 2022	Date

Fill ir	this information to identify your case:			Che	eck one box	only as o	directed in this form and	I in Form
Debt	or 1 Lori M. Chesebro			122	2A-1Supp:			
Debt (Spou	or 2			'	1. There	is no pres	sumption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District of	New York		_     [	applie	s will be r	to determine if a presur made under <i>Chapter</i> 7 i	•
Case (if kno	number			_     ,	_	,	ficial Form 122A-2).	
(	,			'			t does not apply now be y service but it could ap	
					☐ Check i	f this is a	n amended filing	
Off	icial Form 122A - 1							
Ch	apter 7 Statement of Your Cur	rent Mo	on	thly Inc	ome			12/1
attach case i qualif		hich the addir n a presumpt tion from Pre	tiona	al information a of abuse becau	pplies. On the se you do no	he top of a ot have pri	ny additional pages, writ marily consumer debts o	e your name and r because of
1.	What is your marital and filing status? Check one on ☐ Not married. Fill out Column A, lines 2-11.	ly.						
	☐ Married and your spouse is filing with you. Fill ou	t both Colum	nns A	A and B lines	2-11			
	■ Married and your spouse is NOT filing with you.				2 11.			
	☐ Living in the same household and are not legal	•			lumns A and	d B. lines	2-11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	out Column A egally separa	, line	es 2-11; do no under nonban	t fill out Col kruptcy law	umn B. By that appli	/ checking this box, you	
10 the	I in the average monthly income that you received from all stationally. For example, if you are filing on September 15, the 6-motes 6 months, add the income for all 6 months and divide the total louses own the same rental property, put the income from that property.	sources, deriventh period working by 6. Fill in the	ved double resu	during the 6 fulloe March 1 throu ult. Do not include	I months betage August 37 de any income	fore you fil 1. If the ame e amount m	e this bankruptcy case. Your monthly incompore than once. For examp	ne varied during le, if both
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commis	sior	ns (before all	\$	649.48	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments fro	om a	spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regu , your depen	ılar d dent	contributions ts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession,		\ - I- 4	4				
	Out to the form all dedications	\$ 0.0	ebto 0	or 1				
	Gross receipts (before all deductions) Ordinary and necessary operating expenses	-\$ 0.0						
	Net monthly income from a business, profession, or farm	n \$ 0.0	0 0	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	,						
			ebte	or 1				
	Gross receipts (before all deductions)	\$ 0.0						
	Ordinary and necessary operating expenses	-\$ 0.0		Conv hore	¢	0.00	¢	
	Net monthly income from rental or other real property	\$		Copy here ->		0.00	\$	
7.	Interest, dividends, and royalties				\$	0.00	*	

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r1 <u>Lori M</u>	. Chesebro							
				Column Debtor 1	-	Column B Debtor 2 or non-filing s		
Unemploym	nent compensation			\$	0.00	\$		
the Social Se	the amount if you contend that the ecurity Act. Instead, list it here:		a benefit unde	r				
For you For your s	pouse	\$ \$	0.00					
benefit unde not include a United State disability, or pay paid und does not exc	retirement income. Do not include the Social Security Act. Also, excapped compensation, pension, pay, as Government in connection with a death of a member of the uniformeder chapter 61 of title 10, then included the amount of retired pay to we any provision of title 10 other the	cept as stated in the ne innuity, or allowance pa a disability, combat-rela ed services. If you rece ude that pay only to the which you would otherw	xt sentence, do aid by the ated injury or ived any retired extent that it rise be entitled		0.00	\$		
Do not include received as a domestic term United State disability, or	n all other sources not listed about any benefits received under the a victim of a war crime, a crime agrorism; or compensation pension, a Government in connection with a death of a member of the uniformer a separate page and put the total be	e Social Security Act; pa lainst humanity, or inter pay, annuity, or allowa a disability, combat-rela ed services. If necessal	ayments rnational or ance paid by the ated injury or					
·				\$	0.00	\$		
				\$	0.00	\$		
lota	al amounts from separate pages, it	t any.	+	\$	0.00	\$		
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## Case 22-60529-6-dd Doc 1 Filed 08/17/22 Entered 08/17/22 11:49:51 Desc Main Document Page 45 of 51

Debtor 1	Lori M. Chesebro	Case number (if known)	
Da	August 9, 2022		
	MM / DD / YYYY  If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	ո.	

Case 22-60529-6-dd Doc 1 Filed 08/17/22 Entered 08/17/22 11:49:51 Desc Main Document Page 46 of 51

Debtor 1 Lori M. Chesebro Case number (if known)

#### **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 02/01/2022 to 07/31/2022.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **bray** Year-to-Date Income:

Starting Year-to-Date Income: \$0.00 from check dated 1/31/2022.

Ending Year-to-Date Income: \$3,896.88 from check dated 7/31/2022.

Income for six-month period (Ending-Starting): \$3,896.88.

Average Monthly Income: \$649.48 .

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B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of New York

In	re	Lori M. Chesebre	ъ		Case N	0.	
				Debtor(s)	Chapte	r <b>7</b>	
		DISC	LOSURE OF COMPI	ENSATION OF ATT	TORNEY FOR	DEBTOR(S)	
1.	cor	npensation paid to m	§ 329(a) and Fed. Bankr. P. 201 ne within one year before the fill of the debtor(s) in contemplation	ling of the petition in bankru	ptcy, or agreed to be p	aid to me, for services rendered or to	О
		For legal services,	, I have agreed to accept		\$	1,100.00	
			of this statement I have received			1,100.00	
		Balance Due			\$	0.00	
2.	\$	<b>338.00</b> of the fil	ling fee has been paid.				
3.	The	e source of the comp	pensation paid to me was:				
		■ Debtor	☐ Other (specify):				
4.	The	e source of compensa	sation to be paid to me is:				
		■ Debtor	☐ Other (specify):				
5.		I have not agreed to	o share the above-disclosed con	npensation with any other pe	rson unless they are m	embers and associates of my law fir	m.
			are the above-disclosed comper nent, together with a list of the n			ers or associates of my law firm. A attached.	
6.	In	return for the above-	-disclosed fee, I have agreed to	render legal service for all as	spects of the bankrupto	ey case, including:	
	b. c.	Preparation and filir	ng of any petition, schedules, st he debtor at the meeting of cred	atement of affairs and plan w	which may be required		
7.	Ву	All matters s and Adminis limited to Mo Answering M Motions to C	strative Orders but may ch otions to Modify, Motions to Motions to Dismiss, Applic	ve. Attorney will perforn arge additional fees for a to Avoid, Adversaries (fi ations/Motions to Incur Motion to Redeem, Moti	n all duties require any motions or adv ling or answering), Non-emergency de	d pursuant to the Local Rules ersaries, including, but not Answering Motions for Relief, bt, Motions to Sell/Purchase, the Automatic Stay, Motion for	
				CERTIFICATION			
thi		ertify that the foregoi kruptcy proceeding.		any agreement or arrangemen	nt for payment to me for	or representation of the debtor(s) in	
	Auc	just 9, 2022		/s/ Jessica G	Grady, Esg.		
	Date	· · · · · · · · · · · · · · · · · · ·		Jessica G. Gi	rady, Esq. 512322		
				Signature of Att <b>Grady BK, PL</b>			
				225 Greenfiel			
				Ste. 107	-		
				Liverpool, NY		n	
				315-299-9005 jessica@grad	Fax: 315-299-900	U	
				Name of law fir			

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF NEW YORK

In re	Lori M. Chesebro	,
	Debtor	Case No.
Social	Security No(s). and all Employer's Tax Identification 3104	Chapter 7 on No(s). [if any]
	CERTIFICATION OF M	IAILING MATRIX
	I,(we), Jessica G. Grady, Esq. 512322 , the attorney $f$	or the debtor/petitioner (or, if appropriate, the
debtor(	(s) or petitioner(s)) hereby certify under the penalties	s of perjury that the above/attached mailing matrix
has bee	en compared to and contains the names, addresses ar	d zip codes of all persons and entities, as they appear
on the	schedules of liabilities/list of creditors/list of equity	security holders, or any amendment thereto filed
herewi	th.	
Dated:		Jessica G. Grady, Esq.
		sica G. Grady, Esq. 512322
	Att	orney for Debtor/Petitioner

(Debtor(s)/Petitioner(s))

Affirm 650 California St. San Francisco, CA 94108

AFS/AmeriFinancial Solutions, LLC. Attn: Bankruptcy Po Box 65018 Baltimore, MD 21264

AmeriCU Attn: Bankruptcy 1916 Black River Blvd Rome, NY 13440

Bayviewcdata Po Box 385 Fair Haven, NY 13064

CAPITAL ONE BANKRUPTCY DEPARTMENT PO BOX 30285 SALT LAKE CITY, UT 84130

Comenity Bank
Bankruptcy Department
PO Box 182125
Columbus, OH 43218

Comenity Bank PO Box 183003 Columbus, OH 43218

CREDIT ONE BANK PO Box 98878 Las Vegas, NV 89193

Forster & Garbus, LLP 60 Motor Parkway Commack, NY 11725-5710

Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201 LVNV Funding 6801 S. Cimarron Rd. Ste. 424-J Las Vegas, NV 89113

LVNV Funding LLC PO Box 1269 Greenville, SC 29602

LVNV FUNDING/RESURGENT CAPITAL ATTN: BANKRUPTCY PO BOX 10587 GREENVILLE, SC 29063

Macys/fdsb Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Midland Funding 350 Camino De La Reine Ste 100 San Diego, CA 92108

Mission Lane LLC Attn: Bankruptcy P.O. Box 105286 Atlanta, GA 30348

Newman & Lickstein 109 South Warren St., Ste. 404 Syracuse, NY 13202-1121

North Area Volunteer Ambulance Corp, Inc PO Box 535 Baldwinsville, NY 13027

Portfolio Recovery Associates, LLC 120 Corporate Boulevard Norfolk, VA 23502

RESURGENT CAPITAL SERVICES PO BOX 10497 GREENVILLE, SC 29603

Selip & Stylianou PO Box 9004 199 Crossways Park Dr. Woodbury, NY 11797

St. Luke's Memorial Hospital Center PO Box 479 Utica, NY 13502

Synchrony Bank ATTN: Bankruptcy Dept PO Box 965061 Orlando, FL 32896

SYNCHRONY BANK ATTN: BANKRUPTCY DEPT. PO Box 965061 Orlando, FL 32896

TARGET
C/O FINANCIAL & RETAIL SERVICES
MAILSTOP BT PO BOX 9475
MINNEAPOLIS, MN 55459

Webbank/Fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303

Wisconsin Cheeseman Attn: Bankruptcy 1112 7th Ave Madison, WI 53782

Zip Quadpay 228 Park Ave. S PMB 59872 New York, NY 10003